

Overtesting: Pros and Cons from the Patient Perspective

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Overtesting

- Data based framework revealing excess cancer incidence in screened population compared to unscreened population, without proportional decrease in mortality.
- Closely related to Overdiagnosis - Diagnosis of cancers that would otherwise never have caused symptoms or death in a woman's lifetime can expose a woman to the immediate risks of therapy
- Also related to Overtreatment -

General Patient Perspective

Next, we have a question about standard cancer screening tests such as mammograms, pap smears, PSA tests and colonoscopies. Just based on what you may have read and been told, and taking into account the risks, costs, and benefits, do you think such cancer screening tests are done -- [ROTATED: too frequently, about the right amount of time, (or) not frequently enough]?

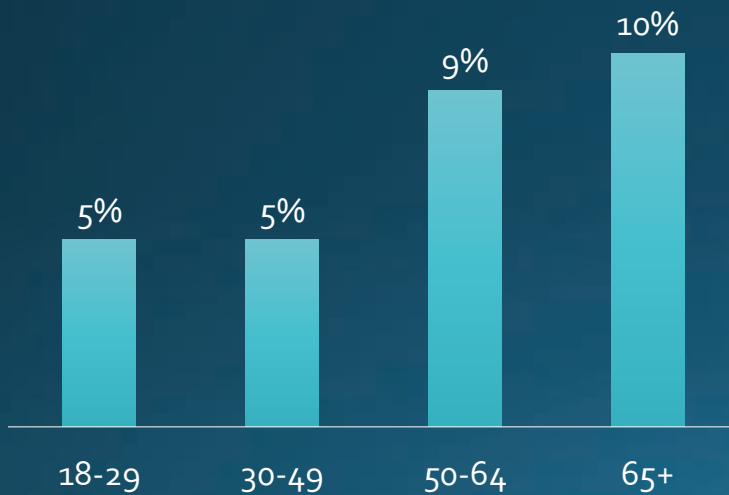
	Too frequently	Right amount	Not enough	No opinion
National adults	7%	58%	31%	4%

Nov. 3-6, 2011

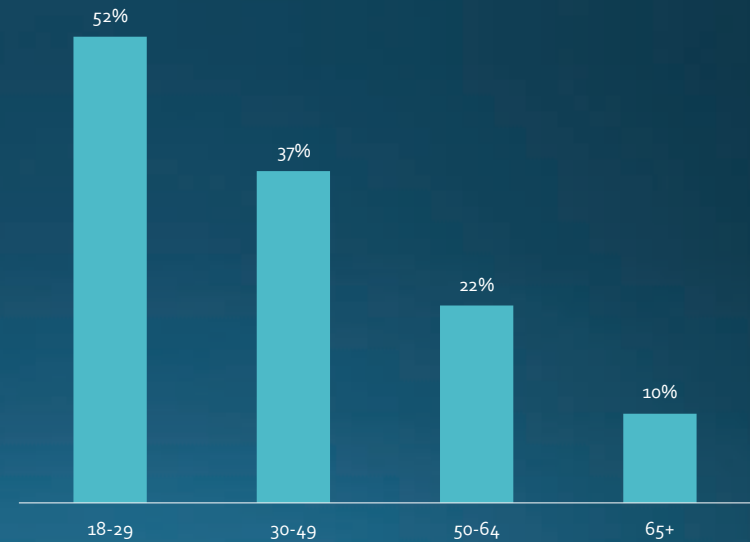
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Age and Perception of Overtesting

Screening Tests are Done Too Frequently



Screening Tests are Done Not enough



Mammography

Provider Perspective

- Benefit
 - Reduction in Breast cancer mortality
- Harms
 - Overdiagnosis
 - False Positives
 - False Negatives

Patient Perspective

- Benefit
 - Reduction in Breast Cancer Mortality
- Harms
 - Discomfort of actual test

Breast Cancer and Mammography

Table 6A. Mammography (%), Women 40 Years and Older, US, 2013

	Within the past year*	Within the past two years*
Overall	51.3	65.9
Age (years)		
40-49	46.6	59.6
50-64	55.8	71.4
65+	51.7	66.9
Race/Ethnicity		
White (non-Hispanic)	52.1	66.4
Black (non-Hispanic)	52.6	66.1
Hispanic	45.9	61.6
American Indian/Alaska Native	48.5	63.0
Asian (non-Hispanic) [†]	50.3	66.9
Education		
Some high school or less	38.7	52.7
High school diploma or GED	47.7	61.4
Some college/Assoc. degree	51.9	67.3
College graduate	59.5	74.8
Sexual Orientation		
Gay/lesbian [‡]	56.8	71.1
Straight [§]	51.4	65.9
Bisexual	#	#
Insurance Status		
Uninsured	22.3	38.0
Insured	54.8	69.6
Immigration status		
Born in US	51.8	66.1
Born in US territory [¶]	47.2	59.3
In US fewer than 10 years	27.0	39.9
In US 10+ years	50.0	66.0

GED-General Educational Development high school equivalency. *Percentages are age adjusted to the 2000 US standard population; see Statistical Notes (page 52) for further information. †Does not include Native Hawaiians or other Pacific Islanders. ‡Response option provided on the NHIS was "gay or lesbian." §Response option provided on the NHIS was "straight, that is not gay or lesbian." ¶Have been in the US for any length of time. #Estimate not provided due to instability.

Source: Centers for Disease Control and Prevention. National Health Interview Survey, 2013. Public use data file. See Survey Sources (page 53) for complete citation.

American Cancer Society, Inc., Surveillance Research, 2015

Benefits of Screening Mammography Medical Perspective

Figure 1: All-cause mortality in the Canadian National Breast Screening Study
[adapted from BMJ 2014;348:g366 doi: 10.1136/bmj.g366]

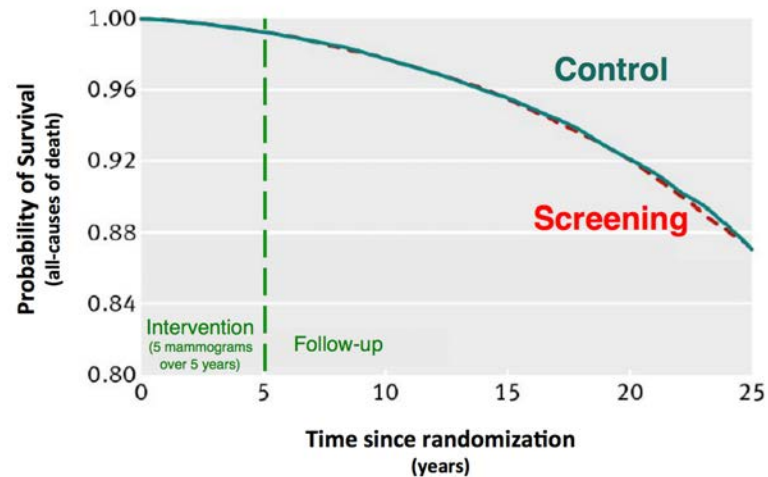
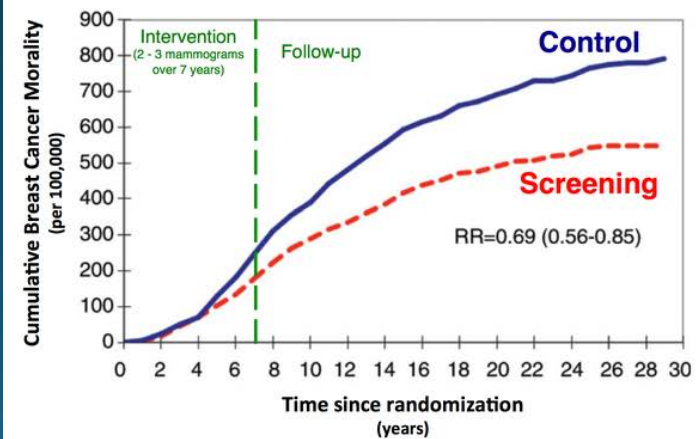
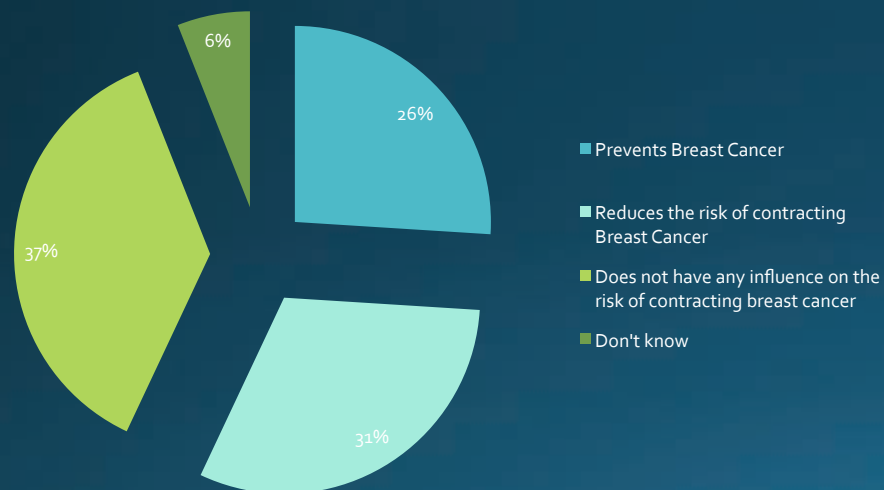


Figure 2: Breast cancer mortality in the Swedish Two-County Trial
[adapted from Radiology. 2011 Sep;260(3):658-63. doi: 10.1148/radiol.11110469]

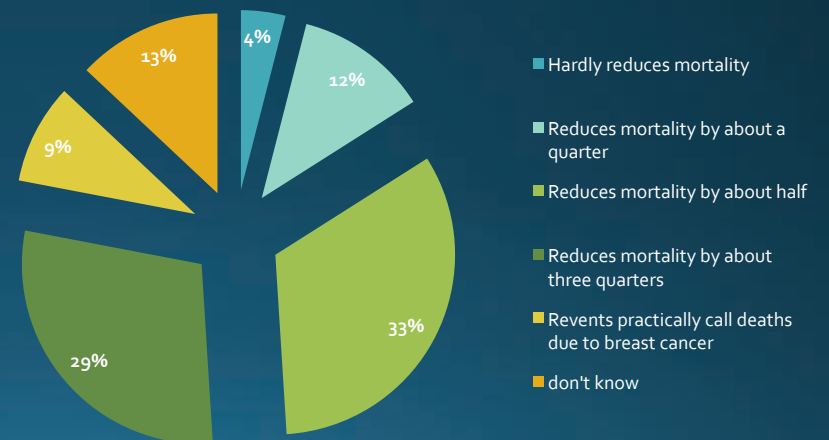


Benefits of Screening Mammography Patient Perspective

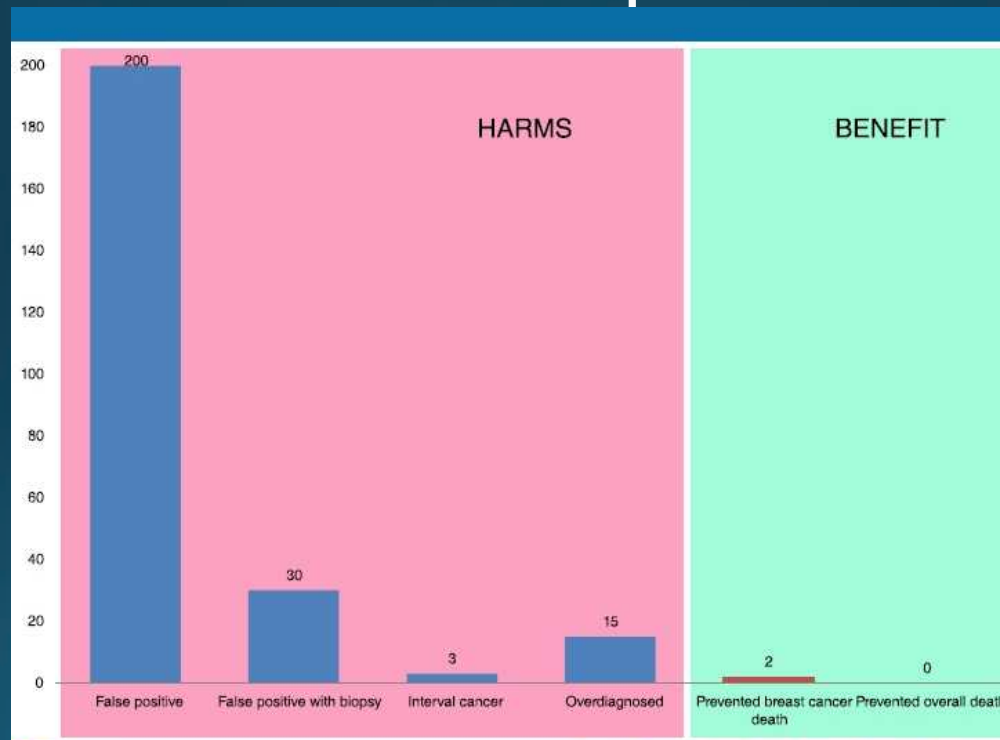
Regular Mammography...



Extent of Benefit of mammography



Harms of Screening Mammography Medical Perspective



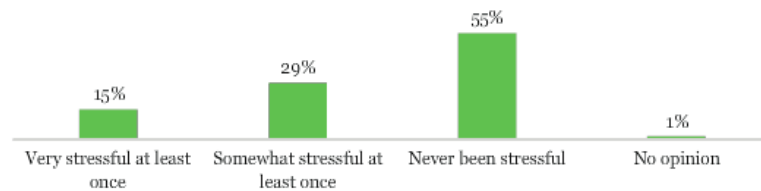
Medscape

Source: Breast Cancer Res © 2015 BioMed Central, Ltd.

Harms of Screening Mammography: Patient Perspective

History of Stress Due to Mammograms Among Women Aged 35-75 Who Have Had a Mammogram (But Not Diagnosed With Breast Cancer)

We'd like to know how stressful the experiences you have had with mammograms have been for you, both in terms of the actual procedure and also any concerns raised by the test results. Which of the following applies to you —having mammograms has never been stressful for you, on at least one occasion having a mammogram was somewhat stressful for you, or on at least one occasion having a mammogram was very stressful for you?

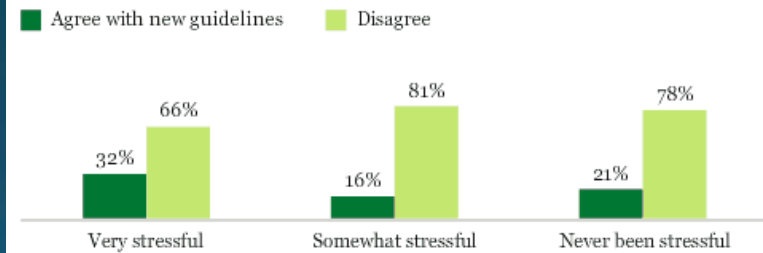


USA Today/Gallup, Nov. 20-22, 2009

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Reaction to New Mammogram Guidelines Based on Personal Experience of Stress With Mammograms

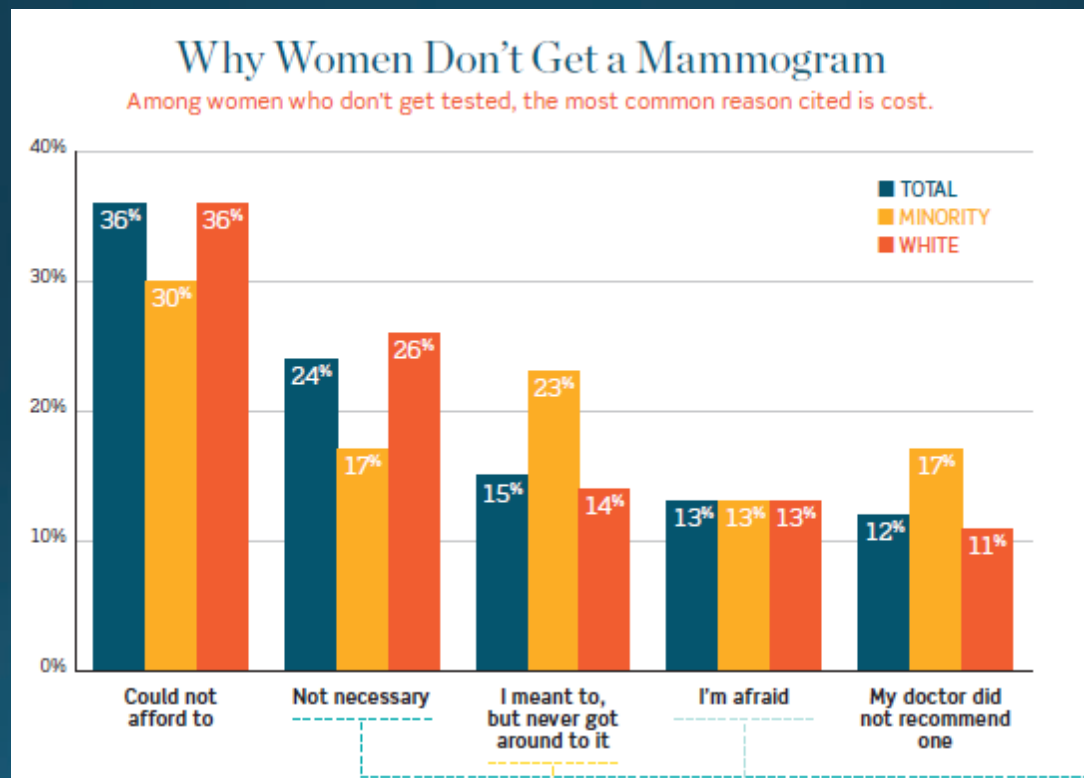
Based on women aged 35-75 who have had a mammogram (but not diagnosed with cancer)



USA Today/Gallup, Nov. 20-22, 2009

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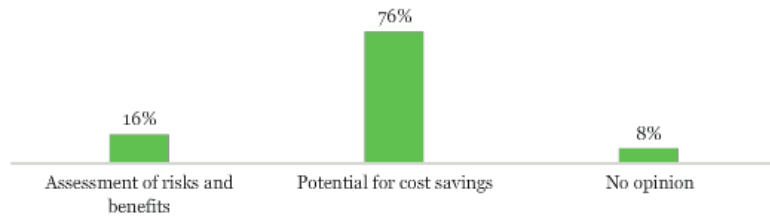
Patient Perspectives



Patient Perspective

Perceived Basis for Panel's Mammogram Guidelines Among Women Aged 35 to 75

Just your best guess, do you think the panel's recommendations were mainly based on -- [a fair assessment of the true medical risks and benefits of mammograms for women in their 40s, (or mainly based on) the potential for cost savings in the healthcare system]?



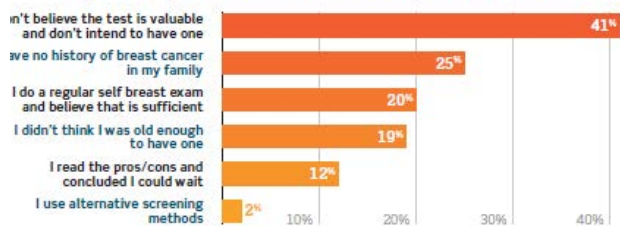
USA Today/Gallup, Nov. 20-22, 2009

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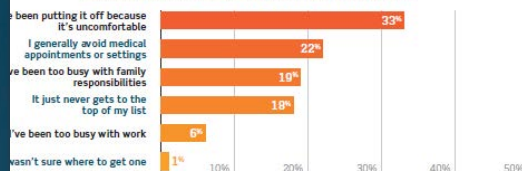
Not Necessary

Among women who believe a mammogram is unnecessary, 41 percent say the test isn't valuable and they don't intend to have one.



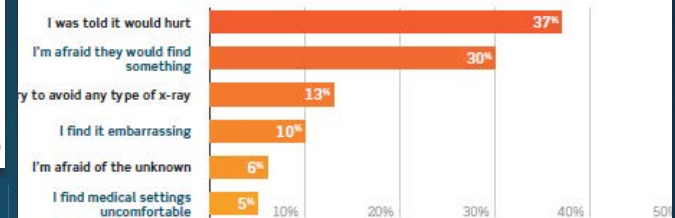
I Meant to, but Never Got Around to It

For women who have never gotten around to having a mammogram, discomfort is cited as the No. 1 reason for putting it off.



I'm Afraid

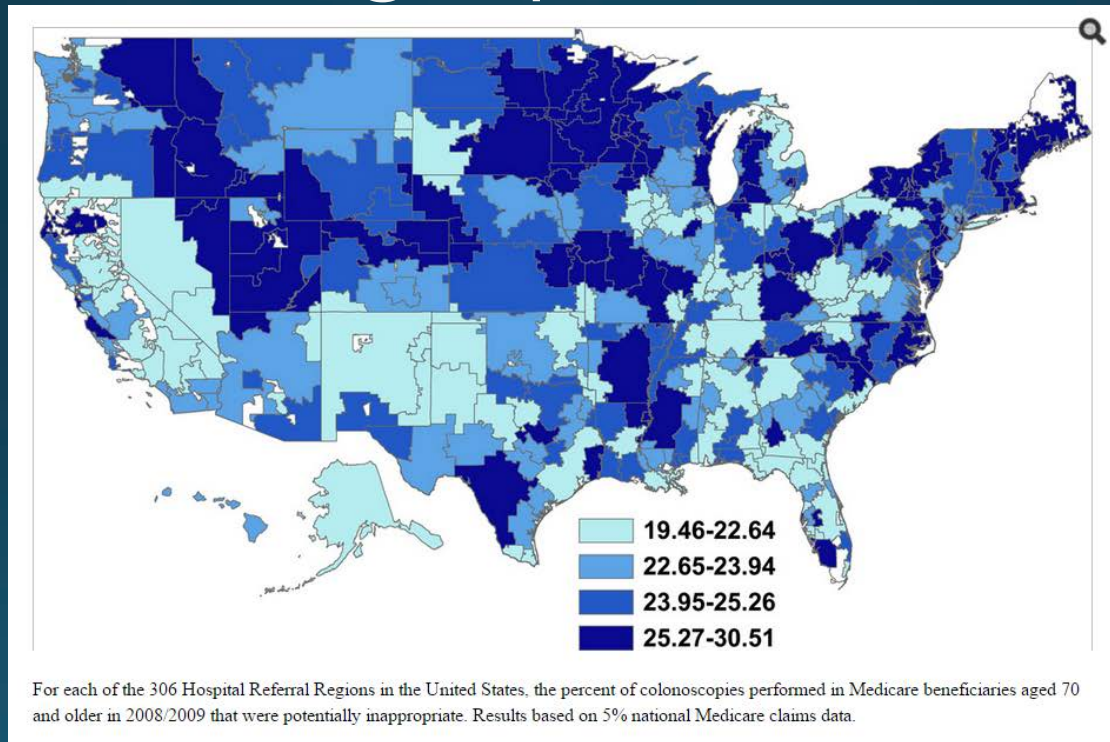
Among women who are afraid to have a mammogram, the top reason is the expectation of pain. Second place is a fear of an abnormal finding.



Colonoscopy

- In 2013 58.3% of US Adults were up to date on colorectal screening.
- Still pockets of overtesting are present
 - Choosing Wisely states **“Do not repeat colorectal cancer screening (by any method) for 10 years after a high-quality colonoscopy is negative in average-risk individuals.”**
 - Medicare data shows 23.5% had a repeat colonoscopy too soon.
 - More than a third of these patients were >80 when they had their FIRST colonoscopy

Colonoscopy Overtesting in pockets across the US

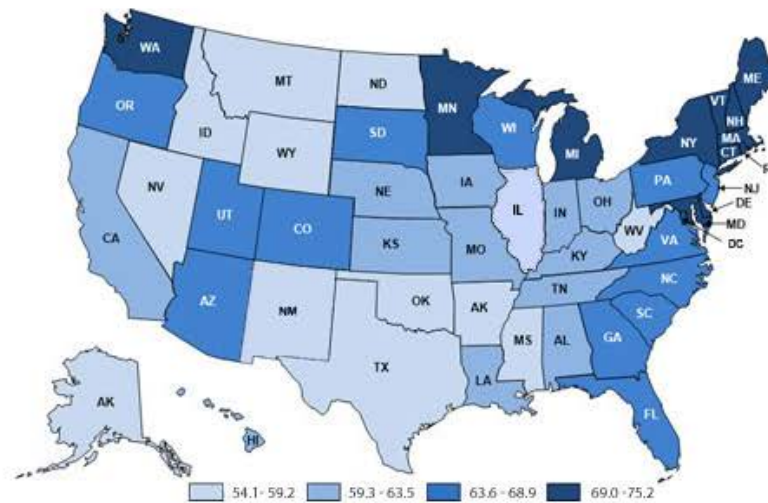


JAMA Intern Med. 2013;173(7):542-550

Colonoscopy

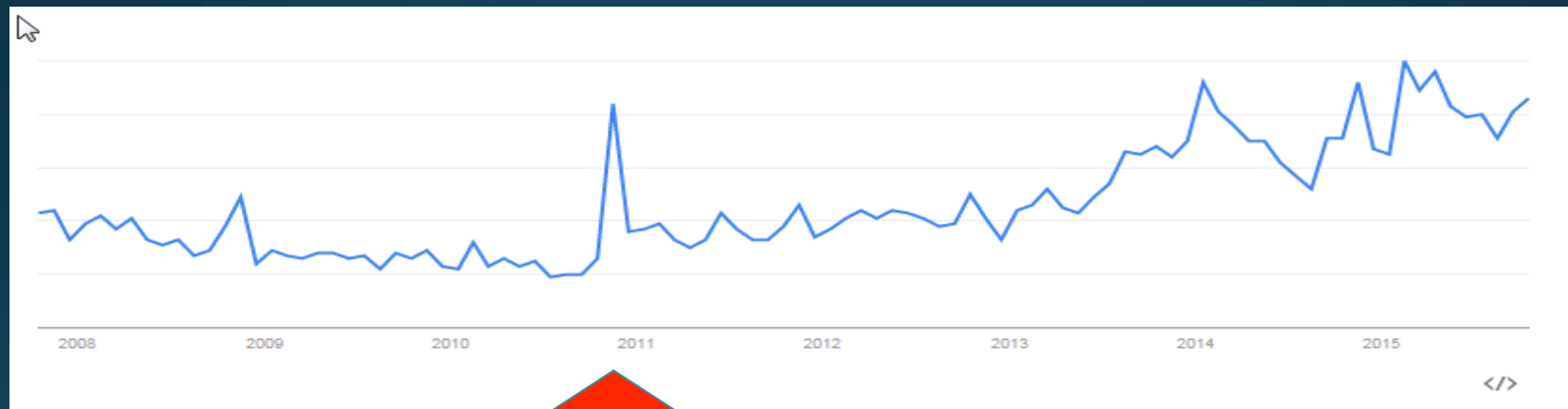
Large areas of underutilization

Percentage of Adults Aged 50–75 Years Who Reported Being Up-to-Date* with Colorectal Test Screening, by State
Behavioral Risk Factor Surveillance System, United States, 2010

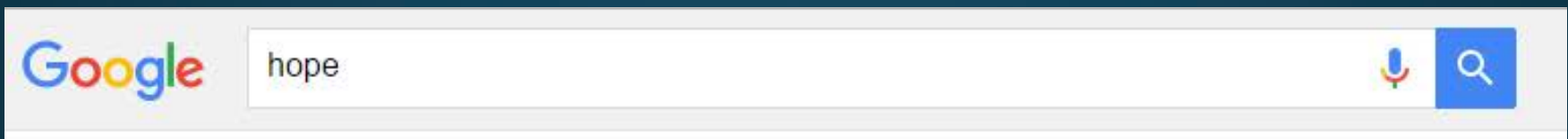


Source: Centers for Disease Control and Prevention (CDC).
Behavioral Risk Factor Surveillance System Survey Data. Atlanta,
Georgia: U.S. Department of Health and Human Services, Centers for Disease
Control and Prevention, 2010.

Lung Cancer Screening Google Searches over time



November 2010, release of NLST data



"We searched hope, More than fear.
We searched science, More than fiction" – Google Trends 2014

Sources

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- *Behavioral Risk Factor Surveillance System Survey Data.* Atlanta, Georgia: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, 2010.
- **Choosing Wisely.org Accessed October 15, 2015.**

Pre/post Question 1.

Among American Adults this percent believe that screening tests are conducted the right amount (not too much or too little).

- A. 16%
- B. 33%
- C. 58%
- D. 74%

Pre/Post Question 2.

Repeat colorectal cancer screening should be done this many years after a high quality colonoscopy is negative in average-risk individuals

- A. 5 years
- B. 7 years
- C. 10 years
- D. should not be repeated